



Arkansas Secretary of State

Charlie Daniels

State Capitol • Little Rock, Arkansas 72201-1094
501-682-3409 • www.sos.arkansas.gov

Instructions: File with the Arkansas Secretary of State's Business and Commercial Services Division, State Capitol, Little Rock, Arkansas 72201-1094 with payment of fee. A copy will be returned to the Corporation at the listed address.

PLEASE TYPE OR CLEARLY PRINT IN INK

ARTICLES OF INCORPORATION OF COOPERATIVE MARKETING ASSOCIATION

The undersigned acting as incorporator of a cooperative under the Marketing Association Cooperative Act 116 of 1921, adopt the following Articles of Incorporation of such Cooperative Marketing Association:

First: The name of the Association is: _____

Second: The purpose for which the Association is formed: _____

Third: Principal place of business: _____

Fourth: Term of existence (not to exceed 50 years): _____

Fifth: Number of directors (must be five): _____

Name

Address

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Sixth: The term of office of the directors: _____

Seventh: (i) If organized without capital stock, whether the property rights and interest of each member shall be equal or unequal, _____

(ii) If unequal, state the general rules applicable to all members by which the property rights and interests of each member may and shall be determined and fixed: _____

Eighth: If organized with capital stock, state: _____ amount of stock and number of shares _____ par value of each share

Ninth: If stock is divided into preferred and common stock, state the number of shares of stock to which the preference is granted and not granted and nature and extent of preference and privileges granted to each: _____

I understand that knowingly signing a false document with the intent to file with the Arkansas Secretary of State is a Class C misdemeanor and is punishable by a fine up to \$100.00 and/or imprisonment up to 30 days.

Incorporator

State of Arkansas

County of _____

Subscribed and sworn to before me, a notary public, on

this _____ day of _____, _____.

My commission expires: _____

Notary Public _____